

PTO/SB/97 (08-03)

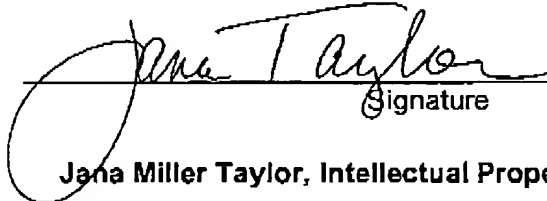
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FOR S/N 10/810410

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<b>CHANGE OF CORRESPONDENCE ADDRESS Application</b>  Address to: Commissioner for Patents P.O. Box 1450 Alexandria, VA 22313-1450	Application Number	10/810410
	Filing Date	3/26/2004
	First Named Inventor	LAKKIS
	Art Unit	2634
	Examiner Name	TBD
	Attorney Docket Number	45389.00011CIP

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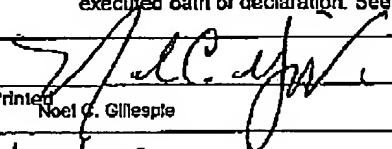
I am the:

☐ Applicant/Inventor

☐ Assignee of record of the entire interest. Statement under 37 CFR 3.73(b) is enclosed. (Form PTO/SB/96).

☒ Attorney or agent of record. Registration Number 47596

☐ Registered practitioner named in the application transmittal letter in an application without an executed oath or declaration. See 37 CFR 1.33(a)(1). Registration Number

Signature 

Typed or Printed Name Noel C. Gillespie

Date 2/22/05 Telephone 619.235.7753

NOTE: Signatures of all the inventors or assignees of record of the entire interest or their representative(s) are required. Submit multiple forms if more than one signature is required, see below.

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